| FROM : Ross Pate | nt Law Office | FAX NO | . : 858 | 755 3122 | May. | 23 2005 01 | :03PM P1 | | | |
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| MAY 2 3 the | | | or Fax | (703) 746-400 | required). Blog | ks 1 through 5 sh | ould be completed w | herc | | |
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| 1. Change of correspondence address or indication of "Fee Address" (37 Clift 1.363). | | | | mes of up to 3 registe | ered patent attorn | John | R. Ross | III. | | |
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| 3. ASSIGNEE NAME. | AND RESIDENCE DATA TO | BE PRINTED ON | THE PATEN | T (print or type) | an assignee is i | dentified below, th | e document has been | filed for | | |
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| a. Applicant cla | ms SMALL ENTITY status. | See 37 CFR 1.27. | ation Fee (if | any) or to re-apply an | y previously paid | issue fee to the ap | plication identified ab | ovc. er party il | | |
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